

| POSITION            | INITIALS | ID NO.                        | DATE     |
|---------------------|----------|-------------------------------|----------|
| FEE DETERMINATION   | BA       | Best Available Copy<br>B90385 |          |
| O.I.P.E. CLASSIFIER |          | 18                            | 11-3-95  |
| FORMALITY REVIEW    | DW       | 72346                         | 11-15-94 |

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 (Through numeral) Canceled  
 ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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